DATENT ADI	DICATION	FFF DFTFRM	INATION RECORD
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Effective October 1, 2000

Application o	r Docket	Number
	1	

	/ .
04829565	1200/1
07021303	1203/1

CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY				
TOTAL CLAIMS			20	*		78886		RATE	FEE		RATE	FEE
FOR			NUMBER F	ILED NUMBE		ER EXTRA	В	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS 20 minus 20=				ıs 20=	*			X\$ 9=		OR	X\$18=	_
INDEPENDENT CLAIMS 5 minus 3			us 3 =	* 2			X40=	80	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than z				o, ente	r "0" in c	olumn 2	L	TOTAL	435	OR	TOTAL	
	С	LAIMS AS A	MENDED	- PAR	RT II					·	OTHER SMALL I	
		(Column 1)			mn 2)	(Column 3)	_	SMALL		OR	SWALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	*	NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIM	=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
							_	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Coli	ımn 2)	(Column 3)	^	0011.1 LL			, . 	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL 4114	=		X40=		OR	X80=	
	FIRST PRESE	ENTATION OF M	IULTIPLE DEF	ENDEN	II CLAIM		J	+135=		OR	+270=	
							L A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	_	(Column 1)			umn 2)	(Column 3)						
ENT C		CLAIMS REMAINING AFTER AMENDMENT	1	NU PREV	SHEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RÀTE	ADDI- TIONAL FEE
N N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	* ENTATION OF N	Minus	***	VIT CL AIR	= -	$\left\{ \right. \right[$	X40=		OR	X80=	
	THINST PHES	ENTATION OF M	NOLITE DEI	CINDEL	VI OLAIN		┙┞	+135=		OR	+270=	
.	If the entry in col	umn 1 is less than	the entry in colu	mn 2, wr	rite "0" in c	olumn 3.	L,	TOTAL	<u> </u>	OR	TOTAL	-
:	**If the "Highest N	umber Previously umber Previously mber Previously F	Paid For" IN TH	S SPACI	F is less th	an 3. enter "3."		DDIT. FEE nd in the ap	propriate bo	.1	ADDIT. FEE olumn 1.	<u> </u>